



Iowa Department of Human Services

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INFORMATIONAL LETTER NO.1729-MC-FFS

DATE: October 19, 2016

TO: Iowa Medicaid Enrolled Home and Community Based Services (HCBS) Waiver and Habilitation Providers

APPLIES TO: Managed Care and Fee-for-Service

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: 2016 Provider Quality Management Self-Assessment

EFFECTIVE: Upon Receipt

The HCBS Provider Quality Management Self-Assessment process was developed as one way for the state to gather data to support the quality framework performance measures as required by the Centers for Medicare and Medicaid Services (CMS). The provider self-assessment process mirrors a CMS review process by requiring waiver providers to develop a quality improvement system of monitoring their own performance and then “showing” the state how it provides quality oversight.

The provider self-assessment requires a provider to identify that they follow the applicable policies and procedures that the state has established based on the CMS assurances, Iowa Administrative Code (IAC) requirements, Iowa Code, and best practices identified through previous quality oversight activities of HCBS providers. The focus of the *2016 Provider Quality Management Self-Assessment* and subsequent review activities is to assist providers in regulatory compliance and quality improvement and is a required component for enrollment as an Iowa Medicaid provider, regardless of the population of members served. Loss of enrollment with Iowa Medicaid would also result in loss of enrollment with any contracted managed care organizations (MCOs).

Once the core policies and procedures have been established through the self-assessment, HCBS Quality Oversight staff utilizes four methods of discovery to verify the ongoing implementation of a provider’s quality performance activities: 1) annual self-assessment; 2) targeted review; 3) focused review; and, 4) periodic review. The reviews may be completed via desk or onsite review.

This system of provider oversight is required for all Medicaid providers enrolled to provide the following Home and Community Based Services:

- AIDS/HIV Waiver: agency Consumer Directed Attendant Care (CDAC), respite, adult day care, counseling;
- Brain Injury Waiver: behavior programming, agency CDAC, respite, supported

- community living (SCL), supported employment (SE), prevocational, interim medical monitoring and treatment (IMMT), adult day care, family counseling and training;
- Children’s Mental Health Waiver: family and community support services, in-home family therapy, respite;
 - Elderly Waiver: agency CDAC (including Assisted Living providers), assisted living service, respite, adult day care, case management (including those that are Chapter 24-accredited), mental health outreach;
 - Intellectual Disability Waiver: agency CDAC, respite, SCL, SE, prevocational, IMMT, adult day care, day habilitation, residential-based supported community living (RBSCL);
 - Health and Disability Waiver: respite, agency CDAC, IMMT, adult day care, counseling;
 - Physical Disability Waiver: agency CDAC; and,
 - Habilitation Services: day habilitation, home-based habilitation, prevocational habilitation, SE habilitation.

New in 2016:

Elderly Waiver Assisted Living Service has been included under the 2016 Provider Quality Management Self-Assessment and subsequent quality oversight activities.

The self-assessment is specifically named in the [Initial Approved Statewide HCBS Settings Transition Plan \(STP\) \(August 2016\)](#)¹ as one element of the multifaceted approach to evaluating provider settings in preparation for the March 2019 implementation date. In 2014 and 2015, the self-assessment was used to gather preliminary results on non-residential HCBS setting locations and to initiate corrective action plans (CAP) to address noncompliance. The data tracking has been further refined in 2016.

Section C has been removed. Following their self-assessment submission, providers will be sent an electronic form and further instructions from their HCBS specialist on how to submit data on all current HCBS locations (residential and non-residential) that will be used in data matching techniques to compare HCBS site locations as outlined in the STP. Self-assessments will not be considered complete until this additional piece of location data has been collected.

Section D. II. regarding staff training has been amended to include the newly implemented training and credentialing requirements for those providing prevocational and supported employment services.

Section D. III. Requirement B. regarding HCBS settings requires a separate response for each enrolled service in order to allow for more comprehensive data collection, including service-specific corrective action plans. In addition, the definition of a provider-owned or provider-controlled setting has been clarified as indicated in the STP.

¹ https://dhs.iowa.gov/sites/default/files/Approved_Initial_STP_Submitted.pdf

Training:

Regional on-site trainings will be conducted by HCBS Quality Oversight Specialists to further outline the *2016 Provider Quality Management Self-Assessment* and expectations for completion. Trainings will be conducted in the following communities:

Date of training	Location	Time
October 26, 2016	Council Bluffs Public Library Meeting Room "B" 400 Willow Avenue Council Bluffs, IA	1:30 pm - 3:00 pm
October 28, 2016	Fairmount Branch Library 3000 N. Fairmount Davenport, IA	10:30 am - 12:00 pm
October 28, 2016	Franklin Avenue Library 5000 Franklin Avenue Des Moines, IA	10:30 am - 12:00 pm
October 28, 2016	Sioux City Public Library Morningside Branch Garretson Room 4005 Morningside Avenue Sioux City, IA	1:00 pm - 2:30 pm
October 28, 2016	Fort Dodge Public Library 424 Central Avenue Fort Dodge, IA	1:30 pm - 3:00 pm
October 31, 2016	Fayette Public Library 104 W. State Street Fayette, IA	10:00 am - 11:30 am
October 31, 2016	Coralville Public Library E. Jean Schwab Auditorium 1401 5th Street Coralville, IA	1:00 pm - 2:30 pm

Please register online for a training session by going to the [DHS website](https://dhs.iowa.gov/ime/providers/enrollment/provider-quality-management-self-assessment/training_schedule)². Select a location and click on the link "Register for This Training." Following the on-site trainings, the website will be updated with the training materials and a Frequently Asked questions (FAQ) document.

²https://dhs.iowa.gov/ime/providers/enrollment/provider-quality-management-self-assessment/training_schedule

Instructions for Self-Assessment Completion

The *2016 Provider Quality Management Self-Assessment* can be found [on the DHS website](#)³. All sections of the self-assessment must be completed in their entirety. Please read the instructions carefully.

The completed self-assessment must be received by the IME no later than December 1, 2016. Failure to submit the required 2016 Quality Management Self-Assessment by December 1, 2016, will jeopardize your agency's Medicaid enrollment.

The HCBS Quality Oversight staff will confirm receipt of the materials. If an agency or HCBS Specialist identifies corrective action is required, it is the agency's responsibility to develop the corrective action plan. Technical assistance may be requested from the HCBS Specialist assigned to the agency.

Questions about this letter or completion of the self-assessment document should be directed to the HCBS Specialist assigned to the county where the parent agency is located. To locate a list of the regional specialists, visit [HCBS Waiver Provider Contacts](#)⁴.

³<https://dhs.iowa.gov/sites/default/files/470-4547.pdf>

⁴<http://dhs.iowa.gov/ime/members/medicaid-a-to-z/hcbs/hcbs-contacts>